PTO/SB/83 (01-06)

REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

		P10/30/03 (01-00)
Application Number	10/773,754	
Filing Date	February 6, 2004	
First Named Inventor	KOELSCH, Gerald E.	
Art Unit	1656	
Examiner Name	Suzanne M. Noakes	
Attorney Docket Number	022266-000930US	

P.O.	Box 1450	for Patents 22313-1450						
Please withdraw me as attorney or agent for the above identified patent application, and								
all the attorneys/agents of record.								
	all the attorneys/agents (with registration numbers) listed on the attached paper(s), or							
	all the attorneys/agents associated with Customer Number 20350							
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.								
The reason	The reasons for this request are: Assignees instructed application be transferred to new law firm for prosecution.							
		CORRECTION	DENOT ADI	7700				
		CORRESPON	DENCE ADL	DRESS				
1. The correspondence address is NOT affected by this withdrawal.								
2. 🛛 Cha	ange the cor	respondence address and direct a	all future corresp	ondence to:				
The address associated with Customer Number:								
OR		· 						
	or dual Name	Morrison & Foerster						
Address		755 Page Mill Road						
City		Palo Alto	State _{CA}		Zip 94304-1018			
Country		US						
Telephone		(650) 813-5740	Email					
Signature	Karen	Babyak Don	/	<u> </u>				
Name	Karen B. Do	IW .		Registration No. 29	9,684			
Date	March 7, 20	h 7, 2007		Telephone No. 858-350-6100				
NOTE: Withdray	wal is effective wh	hen approved rather than when received. Unle or possible extension period, the request to w	ess there are at least	30 days between approval of v	withdrawal and the expiration			